## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(1)

GALEON TAVERN, INC.

FILED	
May 20 1998 8:00am	Ì
Secretary of State	

J 12201						
Principal Place	e of Business	Mailing Address				- I TRULL OFFIELD ROUND LIBER FROND LOUIS BUIL BLOCK BLOCK BLOCK BLOCK LOUIS
'		_				
2401 10TH AV LAKE WORTH		2401 10TH AVE., N. LAKE WORTH FL 33461				
						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						10/19/1992
,	ace of Business	—¬	2a. Mailing Address			4. FEI Number Applied For
21 Suite Apt	# oto	Suite, Apt. #, etc.	26			65-0366662 Not Applicable
Suite, Apt. #, etc.		<u></u>	<u> </u>			5. Certificate of Status Desired See Required Fee Required
City & State			City & State			6. Election Campaign Financing \$5.00 May Be
23		26			ļ	Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. 🗹 Yes 🔲 No
	g, Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered Agent
YEA	AGER, THOMAS J.			81	Name	
	5 PALM BEACH LAKES BLVD.			82	Street Addres	ss (P.O. Box Number is Not Acceptable)
SUI	TE 1200					,
WE	ST PALM BEACH FL 33401			83		
				84	City	85 Zip Code
					•	FL [ ]
11. Pursuant t office or re agent. Lar	o <b>the</b> provisions of Sections 607.050 egi <b>ste</b> red agent, or both, in the State in <b>fam</b> iliar with, and accept the oblic	02 and 607.1508, Florida Statute 3 of Florida. Such change was a gations of, Section 607.0505, Flo	es, the at authorized orida Stat	oove d by ules	named corporation	ration submits this statement for the purpose of changing its registered in's board of directors. I hereby accept the appointment as registered
SIGNATURE .						
	Signature, typed or printed name of registered ag			i Ager	nt signature required	
12.	<del></del>	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 Ti		1	Change Addition
NAME	PULTS, LEON		1.2 NA			
STREET ADDRESS	2401 10TH AVE., N.		1.3 STREET			
CITY+ST-ZIP TITLE	LAKE WORTH FL	DELETE	1.4 CITY - S		- ZiP	Change Addition
NAME	PULTS, GALE	L. J DEELLE	2 1 TITLE		į	C orange C Addition
STREET ADDRESS	2401 10TH AVE., N.		22 NAME		ADDOLGG	
	LAKE WORTH FL		2 3 STREET 2 4 CITY - S			
CITY-ST-ZIP TITLE	DAKE WOMMITE	DELETE	3 1 Til		1-217	Change Addition
NAME			32 NAN			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP					T-ZIP	
TITLE		DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS					ADDRESS	
City-St-ZIP			4.4 CITY-5		[- <b>Z</b> IP	
TITLE		DELETE	5 1 TITLE			☐ Change ☐ Addition
NAME			5 2 NA	ME		
STREET ADDRESS			5.3 ST	REET	address	
CITY-ST-ZIP			5 4 01	TY-SI	1-ZIP	
TITLE		☐ DELETE	6.1 711	ΙŁΕ		☐ Change ☐ Addition
NAME			6.2 NA	ME		
STREET ADDRESS		$\Omega$	6.3 ST	REET	ADDRESS	
CITY-ST-ZIP		//	6.4 CI			
14. Thereby c	ertify that the information supplied v	yth tyris filing does not qualify fo	or the exe	mpt	ion stated in So	ection 119.07(3)(i), Florida Statutes. I further certify that the information

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an addictional with an address.

1-5-96